

Form – IV
(See rule 13)
ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year by the occupier of Health care facility (HCF) or common bio- medical waste treatment facility (CBWTF)]

Sl. No.	Particulars		
1	Particulars of the Occupier	:	
	(i) Name of the Authorised person (occupier or operator of Facility)	:	Dr Jyoti Rajan Sahu M.O I/C , CHC ,PIPILI
	(ii) Name of HCF or CBMWTF	:	OUTSOURCING
	(iii) Address of Correspondence	:	AT –GOVT HOSPITAL PIUPILI PO/PS-PIPILI,DIST-PURI
	(iv) Address of Facility	:	GOVT HOSPITAL PIPILI
	(v) Tel. No, Fax. No	:	06758-240123
	(vi) E-mail ID	:	ghp.puri@gmail.com
	(vii) URL of Website	:	NOT AVAILABLE
	(viii) GPS coordinates of HCF or CBMWTF	:	NOT AVAILABLE
	(ix) Ownership of HCF or CBMWTF	:	(State Government or private or Semi Govt. or any other)
	(x) Status of Authorisation under the Bio-Medical waste (Management and handling) Rules	:	Valid up to 31.03.2024
(xi) Status of Consents under Water Act & Air Act.	:	Applied	
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	30
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research institute or Veterinary Hospital or any other)	:	

	(iii) License number and its date of expiry	:																																																	
3	Details of CBMWTF																																																		
	(i) Number healthcare facilities covered by CBMWTF	:	1																																																
	(ii) No of beds covered by CBMWTF	:	30																																																
	(iii) Installed treatment & disposal capacity of CBMWTF	:																																																	
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	980kg /day																																																
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)																																																		
	Yellow Category : 60 kg 350 gm per month																																																		
	Red Category : 90 Kg per month																																																		
	White : 2 kg per month																																																		
	Blue Category : 30 kg																																																		
General Solid waste : 205 kg per month																																																			
5	Details of the Storage, treatment, transportation, disposed in Kg per annum (on monthly average basis)																																																		
	(i) Details of the on-site storage facility	:	Size :- 8' X 5'																																																
			Capacity : 120																																																
			Provision of on-site storage : (cold storage or any other provision)																																																
	(ii) details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment Equipment</th> <th>No of Units</th> <th>Capacity Kg/Day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or Destroyer Sharps</td> <td>4</td> <td>3</td> <td>-</td> </tr> <tr> <td>Encapsulation or Concrete pit</td> <td>2</td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits</td> <td>3</td> <td></td> <td></td> </tr> <tr> <td>Chemical Disinfection</td> <td></td> <td>1% Hypochloride Solution</td> <td></td> </tr> <tr> <td>Any other treatment</td> <td></td> <td>Liquid waste management</td> <td></td> </tr> </tbody> </table>	Type of treatment Equipment	No of Units	Capacity Kg/Day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or Destroyer Sharps	4	3	-	Encapsulation or Concrete pit	2			Deep burial pits	3			Chemical Disinfection		1% Hypochloride Solution		Any other treatment		Liquid waste management	
Type of treatment Equipment	No of Units	Capacity Kg/Day	Quantity treated or disposed in kg per annum																																																
Incinerators																																																			
Plasma Pyrolysis																																																			
Autoclaves																																																			
Microwave																																																			
Hydroclave																																																			
Shredder																																																			
Needle tip cutter or Destroyer Sharps	4	3	-																																																
Encapsulation or Concrete pit	2																																																		
Deep burial pits	3																																																		
Chemical Disinfection		1% Hypochloride Solution																																																	
Any other treatment		Liquid waste management																																																	

		Equipment	Syntax tank
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum		Red Category (like plastic, glass etc.) 468 kg
	(iv) No of vehicles used for collection and transportation of biomedical waste	1	
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge	Quantity Generated Where disposed
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		
	(vii) List of member HCF not handed over bio-medical waste.		
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	YES	
7	Details trainings conducted on BMW	1	
	(i) Number of trainings conducted on BMW Management.	1	
	(ii) number of personnel trained	30	
	(iii) number of personnel trained at the time of induction	30	
	(iv) number of personnel not undergone any training so far	0	
	(v) whether standard manual for training is available?	YES	
	(vi) any other information)		
8	Details of the accident occurred during the year	NO	
	(i) Number of Accidents occurred		
	(ii) Number of the persons affected		
	(iii) Remedial Action taken (Please attach details if any)		

	(iv) Any Fatality occurred, details.		
9.	Are you meeting the standards of air pollution from the incinerator? How many times in last year could not meet the standards?		YES
	Details of Continuous online emission monitoring systems installed		
10	Liquid waste generated and treatment Methods in place. How many times you have not met the standards in a year?		
11	Is the disinfection method or sterilization meeting the log 4		
12	Any other relevant information	:	(Air pollution control devices attached with the incinerator

Certified that the above report is for the period from

01-January 2020 to 31-December 2020

Date: 22.03.2021

Place:-CHC PIPILI


 Name and signature of the 22/03/2021

Head of the institution

Medical Officer I/O
 Govt. Hospital Pipili P.O.